Attorney Docket No.

Patent 003300-723

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of SEP 0 6 2005 Lars A. HANSON et al. Application No.: 09/743,107 Filing Date:

**MAIL STOP AMENDMENT** 

Group Art Unit: 1653 Examiner: Chih Min Kam Confirmation No.: 5780

August 21, 2001 Title: PEPTIDES BASED ON THE SEQUENCE OF HUMAN LACTOFERRIN AND THEIR USE

## **AMENDMENT/REPLY TRANSMITTAL LETTER**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed is a reply for the above-identified patent application.				
X	A Petition for Extension of Time is also enclosed.			
	Terminal Disclaimer(s) and the \$65.00 (2814) \$130.00 (1814) fee per Disclaimer due under 37 C.F.R. § 1.20(d) are also enclosed.			
	Also enclosed is/are			
	Small entity status is hereby claimed.			
	Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the \$395.00 (2801) \$790.00 (1801) fee due under 37 C.F.R. § 1.17(e).			
	Applicant(s) requests that any previously unentered after final amendments <u>not</u> be entered. Continued examination is requested based on the enclosed documents identified above.			
	Applicant(s) previously submitted			
	on, for which continued examination is requested.			
	Applicant(s) requests suspension of action by the Office until at least which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.			
	A Request for Entry and Consideration of Submission under 37 C.F.R. § 1.129(a) (1809/2809) is also enclosed.			

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Application No	09/743.107	

No additional claim fee is required.
An additional claim fee is required, and is calculated as shown below.

AMENDED CLAIMS					
	No. of Claims	Highest No. of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total Claims	46	MINUS 45 =	1	x \$50.00 (1202) =	\$ 50.00
Independent Claims	8	MINUS 7 =	1	x \$200.00 (1201) =	\$ 200.00
If Amendment adds multiple dependent claims, add \$360.00 (1203)					
Total Claim Amendment Fee					\$ 250.00
Small Entity Status claimed - subtract 50% of Total Claim Amendment Fee \$ 0.					\$ 0.00
TOTAL ADDITIONAL	\$ 250.00				

	A check	in the amount	of is enclosed for the fee due
X	Charge	\$ 250.00	to Deposit Account No. 02-4800.
	Charge		to credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

**BUCHANAN INGERSOLL PC** 

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: September 6, 2005

Ву

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